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ABSTRACT

The manual provides personnel of educational cooperatives (confederations of local school districts) with information to stimulate involvement in special education (SE). Four basic divisions cover the following areas: definitions and other data deemed necessary for a basic knowledge of exceptional children's education in Appalachia; suggestions for executive directors attempting to establish SE activities; information on activities suited to cooperative involvement, data on model programs, and lists of curriculum aids; and a listing of further sources of information. Guidelines concern such topics as assessment, inadequate financial support, and lack of interest and support from school personnel. The areas deemed appropriate for cooperative involvement include the position of a SE coordinator, curriculum materials evaluation, facility planning and development, development of cooperative diagnostic team and a paraprofessional staff, inservice training, parent education, a resource center, a demonstration program, and media systems. Appendixes contain a list of state offices coordinating programs for the mentally retarded, tentative totals of handicapped children in Claiborne County, references on regional SE activities, addresses of organizations in the Special Education Instructional Materials Centers/Resource Materials Centers Network, and a list of bibliographies available from The Council for Exceptional Children. (GW)

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Educational Cooperative Exceptional Children Activities

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Foreword

The tasks and duties assigned the executive director of an Educational Cooperative¹ or the chief administrative officer of any other type of regional educational agency are numerous and demanding. If the director attempts to follow the role advocated by Eidell (1967, p. 6), he probably will become involved in many activities. Eidell suggests that the executive director attempt to identify the educational deficiencies of the Cooperative area and guide the governing board toward establishing solution priorities.

There can be little doubt that special education, or education for exceptional children as it is more correctly termed, will be one area in which many regional education agencies will become involved. There is evidence to support this supposition nationally and locally. The 1970 White House Conference, which identified national priorities, ranked two learning forum proposals as top priority items (Weissman, 1971, p. 50). The first was a provision for every child to learn, grow, and live creatively. Presently our schools and communities are not providing the atmosphere and resources for development of the creative child. To fill this need, avenues recommended were: a more diverse and flexible educational system, creative approaches to learning, a stress on early childhood education, expansion of cultural and creative learning centers, and integration of aesthetic education in every school, institution, or agency that serves children. The second ranked learning forum proposal called for a redesigning of education to achieve individualized, humanized, child-centered learning with specific support for a proposed national institute of education. Both of these proposals, although not specifically talking about the education of exceptional children, refer to the need for working with every child to provide individualized, child-centered learning. Because the number of exceptional children probably exceeds eight percent of the school age children (as will be shown later in this paper), a great deal of emphasis must be placed upon these children to fulfill the national priority requirements.

Emphasis on exceptional children education at the state level can be documented with various reports of state needs assessments. For example, the Kentucky Educational Needs Assessment (1970) indicated that learners in Kentucky need "more assistance with physical and mental differences." This area was one of ten listed. The Tennessee Department of Education (1969) listed "realistic opportunities for the handicapped learner to approach his learning potential" as one of eight critical educational needs in Tennessee. In West Virginia, special education was one of the ten areas listed as requiring attention by selected respondents in an Appalachia Educational Laboratory survey.

¹An Educational Cooperative is a confederation of local school districts which bind themselves together in order to increase their capacity through joint effort. A Cooperative employs media, mobile facilities, and communications technology to change and improve both educational organization and process.

The unique characteristics of an Educational Cooperative make it a prime organization in which to coordinate exceptional children's programs. A master plan for school district organization in Ohio listed special education as one of the many duties to be assigned to it in cooperation with the administrative districts (Ohio State Department of Education, 1966, p. 92). Kohl and Achilles (1971, p. 8) included special education in their list of representative program components to be considered for intermediate unit activity. The summary report of the state of Ohio Needs Assessment conducted by Battelle Memorial Institute indicated a need for regional education service centers (Hilt, 1970, p. 18). Programs in the area of special education were recommended services to be provided by these centers.

The references will give an executive director an indication of the need to become involved in the education of exceptional children. Such involvement would necessitate some degree of knowledge of the broad educational area involved. Typically, Cooperative management and administrative personnel would not be trained in exceptional children education. Therefore, some effort must be put forth on their part to gain at least a basic understanding of this field.

A person endeavoring to gain knowledge by surveying the literature in exceptional children education soon would become overwhelmed. For example, there were more than 1,800 articles published on mental retardation alone prior to 1969. Between January and September, 1970, at least 665 articles were published in this one area (Tymchuk, 1971, p. 44). Even attempts at selective coverage would be most difficult.

It is the purpose of this manual to provide Cooperative personnel with a brief look at exceptional children education and to introduce ideas for further consideration with respect to cooperative involvement in this particular area.

The manual has four basic divisions. Chapter 1 contains introductory material including definitions of terms, statistics, sources of information, and other data deemed necessary for a basic knowledge of exceptional children education in Appalachia. Chapter 2 suggests steps to be taken by an executive director when attempting to establish activities in exceptional children education. Chapter 3 contains information on various activities deemed best for Cooperative involvement instead of local district involvement, explores model programs in various areas of exceptional children education, and offers lists of curriculum instruction aids for exceptional children classes.

Together Chapters 2 and 3 outline various ways in which an Educational Cooperative could become involved in the education of exceptional children. The suggested activities include:

- Conducting an exceptional children needs assessment (page 9).
- Training teachers (page 16),

- Providing facilities (page 16),
- Providing additional monies or better allocation of available money (page 17),
- Combining isolated pupils to obtain adequate classes (page 19),
- Educating school personnel and others to the needs of exceptional children (page 19),
- Providing coordination services (page 21),
- Evaluating materials (page 23),
- Planning for facility development (page 26),
- Providing a central professional staff (page 28),
- Providing a paraprofessional staff (page 32),
- Providing inservice training to teachers (page 35),
- Providing parent education (page 35),
- Maintaining a resource center (page 36),
- Providing a proving ground for new programs (page 36),
- Adopting modern technology for use in exceptional children education (page 37).

Chapter 4 includes other data or sources of information that may prove helpful to a director.

Chapter 1

Introductory Material

Definition

As a rule, the first step in an investigation or study in a new field is to attempt to learn the specific terminology or language involved. An executive director probably would find that the terminology involved in exceptional children education cannot be considered unique. It is somewhat common to education in general; clarification, however, may need to be made. Even the term "exceptional children" can be misleading.

The exceptional child is difficult to define. This is evidenced by the various definitions given in the literature on the topic. The dictionary definition refers to anything that is extraordinary, unusual, or outstanding. In this case, the term could be used to describe those pupils whose patterns of educational needs are very different from those of the majority of children and youth.

Cruickshank (1967, p. 4) carries the definition somewhat further by indicating that an exceptional child is "one who deviates intellectually, physically, socially, or emotionally so markedly from what is considered to be normal growth and development that he cannot receive maximum benefit from a regular school program and requires a special class or supplementary instruction and services." Dunn (1963, p. 2) expands the definition given by further stating that the exceptional pupils are those "who differ from the average to such a degree in physical and psychological characteristics that school programs designed for the majority of children do not afford them opportunity for all-around adjustment and optimal progress, and who therefore need special instruction or in some cases special ancillary services, or both, to achieve a level commensurate with their respective abilities." Therefore, "exceptional children" appears to be an umbrella-like term which encompasses many different groups of children and many different degrees of disability within each group. Other designations of the

same type of child that have been used in the past are: handicapped, deviant, atypical, and special (Cruickshank, p. 9). For the purposes of this manual, the terms "exceptional children education" and "special education" will be considered synonymous.

Not only has there been confusion resulting from differing definitions and differing titles, there also can be confusion concerning the way the various types of exceptional children are categorized. Again, many such categorizations have been made, some quite general, others very specific. Jordan (1962, pp. 3-4), for example, divides the exceptional child into five disability groups:

- Language problems,
- Mental retardation,
- Crippled children,
- Emotional disturbances,
- Multiple handicaps.

Dunn (p. 7) considers exceptional children in seven broad categories:

- Pupils with intellectual limitations
 - Educable
 - Trainable mentally retarded
- Pupils with superior intellect
 - Gifted
- Pupils with behavior problems
 - Emotionally disturbed
 - Socially maladjusted
- Pupils with speech problems
- Pupils with impaired hearing
 - Deaf
 - Hard of hearing
- Pupils with impaired vision
 - Blind
 - Partially seeing
- Pupils with neurological and nonsensory physical impairments
 - Crippled
 - Chronic health cases

Cruickshank (p. 4) gives the following list:

- The intellectually exceptional child
 - Gifted child
 - Slow learner
 - Educable mentally retarded
 - Severely mentally retarded
 - Physically handicapped
 - Impaired vision
 - Impaired hearing
 - Impaired speech
 - Crippled children
 - Brain injured children
- The emotionally disturbed
 - Emotionally disturbed
 - Emotionally maladjusted
- The multi-handicapped
 - In connection with this last group, Cruickshank gives a list and a table of the incidence of multiple exceptionality in ten school districts. This list includes a listing of 1,007 children having some type of multiple exceptionality. It contains 50 different combinations of problems.

The above material indicates that there is wide diversity in the basic definitions and in the different ways in which exceptional children are or can be categorized. It is suggested that the executive director, in order to avoid confusion in his particular situation, investigate and adopt the various terminology and categorizations used by the state department of education in his state. For example, in Kentucky (State Dept. of Ed., 1970, p. 1) the labels given to the areas of exceptionalities of children who require special education are:

- Crippled and special health problems,
- Mentally retarded (educable and trainable),
- Hearing handicapped (deaf and hard of hearing),
- Neurologically impaired (learning disabilities),
- Emotionally disturbed,
- Speech handicapped,
- Visually handicapped.

In Ohio (State Dept. of Ed., 1969, pp. V-VI), the categories are labeled:

- Deaf,
- Hard of Hearing,
- Crippled,
- Visually handicapped,
- Neurologically handicapped,
- Emotionally handicapped,
- Educable mentally retarded,
- Speech and hearing handicapped,
- Child study services (basically psychological).

Even after adopting state terminology, an executive director may find other strange usages and connotations within the language of exceptional children education. It is suggested that these be studied when first encountered to avoid possible confusion and lack of communication. Pertinent literature always can be found to provide help.

Incidence

After an executive director becomes acquainted with the terminology of exceptional children education and with the labels that apply to the various types of exceptional child, perhaps he then would ask, "To what extent can I expect this type of child in my Cooperative area?" The answer to this question is very important and will require the greater part of the executive director's energies within the first few months of exceptional children activities. Information and suggestions concerning the methods to follow in gaining specific and detailed answers to the question will be given in the following section of this paper. However, a general discussion of exceptional children's needs is deemed necessary for this chapter.

There has not been, nor will there probably be, a completed census of the number of exceptional children in the United States. The figures of the U.S. Bureau of the Census undoubtedly are inaccurate because of the reluctance of parents to admit that they have handicapped children and because the census-taking procedures lacked sufficient skilled personnel. Many parents consider the data too threatening to be released to unfamiliar and nonprofessional personnel.

It is difficult to estimate the numbers of exceptional children from noneducational records because of the use of different frames of reference.

For example, all children with post-polio crippling conditions would need to be counted for medical purposes, yet the majority of children who have had a good recovery do not have unusual educational needs and can be educated in regular classrooms. Likewise, figures cannot be estimated from the number of exceptional children enrolled in special education services. Few school systems serve all their exceptional children and therefore do not have complete records. Another reason for the difficulty is based on the fact that multiple exceptionalities often exist, in which case a child with two educationally significant exceptionalities frequently will be counted more than once since no hard and fast rule has been applied to the development of a formula.

There have been several attempts at estimating the percentages of exceptional children. Three of these are given in Table I.

It is noted that the total percentage of incidence of exceptionality ranges from 9.2 to 12.7 percent. Some writers feel that the estimation should be only around eight percent of the school age population since the figures appear to have been based on pupils with multiple exceptionalities (Dunn, 1966, p. 17). Dr. Roger Elzer (1971), director of Special Education, state of West Virginia, substantiates this lower figure through personal experience.

If the above estimates are accurate, the executive director of the Cooperative probably will find a substantial number of exceptional children within his Cooperative area. If he is dedicated to the goal of providing an education to all students within the area, he should see the need for programs and services for these children.

Within the total realm of categories of exceptional children there are many different degrees of exceptionality within each specific type. An attempt at establishing a program for each level or each type would be an impossibility. An administrator easily could find himself developing programs for individual students, an idealistic but not realistic goal. However, by considering the total picture of the exceptional children needs in his area, the executive director should be able to determine various levels of needed help and instruction. He then could look at each level and attempt to determine means to which assistance could best be given. For example, one author has listed seven levels of the internal organization of special education programs (Willenberg, 1967, p. 512).

Level One. Organization for child who needs adjunctive services only, such as special transportation, medication, etc. No modifications in content or procedures of learning opportunities are required. The child is educated in the regular school program.

Level Two. Organization for child who requires some supplementary teaching in the regular classroom. Such a child, given special attention by the regular classroom teacher, also may need some modifications in the materials and methods used in this instruction.

(5)

Level Three. Organization for child who requires specialized supplementary teaching such as that provided in integrated programs for the visually handicapped or speech therapy for speech handicapped children enrolled in regular grades. Program includes modifications in content and/or materials and techniques.

Level Four. Organization for child who requires special day class instruction. Class is located in a regular school where child may participate part time incidentally and on a planned basis with regular class pupils. Program includes fundamental modifications in content, materials and methods of instruction.

Level Five. Organization for child who requires full-time instruction and ancillary services in a special day school such as that for multi-handicapped or trainable mentally retarded children. Program includes comprehensive and basic modifications in the nature, scope, and sequence of instructional offerings and in supportive services needed.

Level Six. Organization to provide for child who is homebound or hospitalized. Child is unable to attend other organized school programs. Instruction offered may vary in scope and sequence, or in the materials and methods used. This level differs from the others in that the instruction usually is organized to compensate for the circumstances associated with the child's confinement at home or in a hospital.

Level Seven. Organization for child who is placed in an institution. In addition to treatment and care for children who require hospitalization or physical management, this category also includes children in attendance at residential schools such as those for the blind and deaf. When institutional placement includes education, the instruction may vary in practically every conceivable way to compensate for differences in behavior, learning, and physical ability.

By looking at this list or a similar one, the executive director soon can see certain areas in which his organization could play a part. For example, in the list provided, Levels Two, Three, Four, and Five appear to be areas in which Cooperative activity may be feasible. Level One appears to be more feasible on a local school basis, while Levels Six and Seven appear to be more suitable for other agencies.

Traditionally, the administration of special education programs has been facilitated through governmental agencies at the federal, state, and local levels. The federal government supports research and training and disseminates information through publications, conferences, and consultations. The state governments reimburse local school districts for special services, establish standards, certify teachers and programs, and offer consulting services to local school districts. The states also provide special schools for certain types of exceptional children, the most common are the severely mentally retarded, the deaf child, and the blind child. Local school administration has been responsible for the actual operation of specific programs within their districts. It is at this point that the

Cooperative may be able to provide better services and programs than have been offered in the past. Finally, in addition to the government agencies, there have been many private groups and associations that have been responsible for the initiation of many of the programs and services in the behalf of exceptional children.

The executive director will find, when attempting to become involved in the education of exceptional children, many variables that will affect the type of programs to be established and the specific activities to be done within the programs. The types of exceptional children found, the number of each type isolated, the amount of monies that are available, the facilities available, and the attitudes of the community and school personnel are just a few of the possible factors that will influence his activities. All of these will be considered in the following sections of this manual.

The executive director also can expect to find that the needs in his area will be more demanding than he has means to fulfill. Not only must priorities be established among the general areas of education for Cooperative involvement but also within the specific area of exceptional children education. In this instance one general rule to consider is that the initial efforts should be made, if all other things are equal, in the area that will do the greatest good for the greatest number of pupils. In other words, start where you will get the biggest return for your efforts. In most situations, programs in speech and hearing and programs for physically handicapped children would be ranked in first order.

Table 1

Prevalence Estimates of the School Age Population Classified
as Exceptional for Special Education Purposes
(Taken in Part from Cruickshank, p. 32)

Areas of Exceptionality ^a	U.S.O.E. ^b	Percentage Estimated	
		D.C.B.S. ^c	Other ^d
Intellectually limited	2.3	2.0	2.0
Educable mentally retarded	(2.0)		
Trainable mentally retarded	(0.3)		
Intellectually superior (gifted)	2.0	2.0	2.0
Disturbed and maladjusted	2.0	2.0	2.0
Emotionally disturbed			
Socially maladjusted			
Speech impaired	3.5	2.10	2.0
Hearing impaired	0.6	0.54	1.5
Hard of hearing	(0.5)		
Deaf	(0.1)		
Visually impaired	0.09	0.13	0.2
Partially seeing	(0.06)		
Blind	(0.03)		
Nonsensory physically impaired	2.0	0.47	
Crippled	(1.0)	(0.1)	1.5
Chronic health problems	(1.0)	(0.37)	1.5
TOTALS	12.49	9.24	12.7

^aPupils with multiple special education needs counted more than once.

^bFrom Mackie, Romaine P., Personal communication, 1962.

^cFrom the Dominion of Canada Bureau of Statistics, Statistics of Special Education for Exceptional Children, 1953-1954 (Ottawa: Queen's Printers, 1959).

^dR. P. Mackie and L. M. Dunn, College and University Programs for the Preparation of Teachers of Exceptional Children, Bulletin No. 13 (Washington, D. C.: U.S. Office of Education, 1954), p. 3.

Chapter 2

Recommended Activities

Needs Assessment

If an Educational Cooperative executive director and governing board accept the premise that the Cooperative may be a good administrative entity for exceptional children activities, they must determine the specific needs of the children. As indicated in Chapter 1, national estimates propose that almost one tenth of a Cooperative student body could use and should have some type of educational program or activity differing from the programs for the normal children. The task of attempting to establish exactly what is needed and to plan accordingly is very difficult.

The first recommended activity for the Cooperative would be to survey all the literature that may include valid, up-to-date information concerning the local needs. The exact sources of this data will be unique to the specific state in which the Cooperative is located. However, two possible sources can be suggested. During the early '60s each state in Appalachia prepared a state plan for mental retardation. Each of these plans involved a needs assessment of the state and a listing of specific recommendations for activities (Blumberg, 1971). At the time of this writing each of these states still maintains an executive director for mental retardation or a similar position. A list of the current directors with addresses is included in the Appendices. Copies of state plans for retardation with recommendations can be obtained from these various offices. It is suggested that the executive director contact his state office and receive these materials. He should endeavor to determine how successful his state has been in following the recommendations made at that time. This may give him some insight into what might be needed in his local area. For example, in A Plan Called Promise, the W.Va. Commission on Mental Retardation recommended, in part, that all districts in the state have mandatory special education or exceptional children classes. The recommended actions were taken; it will be mandatory for each of the districts in the state to have such classes by the 1974-75 school year. This type of information may be very helpful for an executive director in his planning activities. If he is aware that certain classes must be maintained by the '74-'75 school year, he could begin to plan activities to help organize them. This type of service may be welcomed by the school management. If the director found that the classes

were already being provided, he could forget about this type of activity and begin to look toward other areas in special education.

Another source of informative materials would be the various needs assessments that have been conducted on the state level. One type of such assessments was partially described in Chapter 1 of this manual. Other types have been conducted, with reference directly to special education. For example, each year the Division of Special Education in the Department of Education of the Commonwealth of Kentucky publishes a status report on the programs for exceptional children. This report contains statistical tables indicating the number of classroom units being provided for exceptional children in Kentucky, the estimated number of children needing such classes, and the percentage of need being met or not being met by each type of special education unit.

The Kentucky report considered first the entire state and then particular regions. Data are given both for the state and each region. An executive director could locate the region(s) within his Cooperative and obtain very pertinent and up-to-date information from the data given. The other state departments of education in Appalachia could no doubt furnish similar types of data. It is suggested that the executive director contact the state director of special education for this material.

Other information can be obtained from other agencies within each of the Appalachian states. Health and Welfare Departments, Medical Associations, and other organizations can furnish useful materials.

Data obtained from the above sources can be most helpful, but Cooperative personnel must guard themselves against drawing spontaneous conclusions from the results. Care must be taken in all decisions made. For example, these assessments no doubt have been prepared with specific purposes in mind. It is likely that the determined purposes or goals are somewhat different from the goals of the Educational Cooperative attempting to plan and conduct exceptional children activities. In the preparation of any statistical report, the purpose for which the material will be used would be certain, to influence the manner in which the material was presented. If a report was prepared to show how effective the present special education programs are, the data might possibly be given at an over-exaggerated level. On the other hand, if a report has been prepared to show the inefficiencies of the program, emphasis would tend to go the other way.

Cooperative personnel also must guard against choosing a satisfactory level of involvement before all data are collected and before decisions can be made on a rational basis. For example, if one looks at the number of teachers of educable mentally retarded students hired by the district within the Cooperative area and accepts this as a strong indication of the relative effectiveness of exceptional children activities, various results will occur depending upon the specific state. To illustrate, two sources of information can be cited. In Ohio, if a Cooperative were formed by combining six adjoining counties in the southeastern section of the state, the student population would be approximately 37,000. The Ohio Special Education Directory, 1969-70 indicates that the districts within this Cooperative area employed 60 teachers

for educable mentally retarded classes. On the other hand, in a similar region (with respect to size) in Kentucky, there were only seven EMR teachers. When confronted with these data the Cooperative director in Ohio immediately might determine that the needs in his area, especially with respect to educable mentally retarded pupils are being met. This would be a mistake. He should not at this point decide to give no further consideration to the area of exceptional children. The greater percentage of teachers for the retarded only indicates that the needs in that one specific area are perhaps being met better than in the adjoining state of Kentucky. This does not imply that the total program for exceptional children is that much better or is at all sufficient. The executive director would do well to look at more specific items and sources of data obtained from his own area.

How can the executive director collect and analyze data from his particular area? The answer to this question is far from being simple and straight forward. The state, the locale, the size of the Cooperative, the types of agencies existing in the Cooperative area, the amount of funding available for a local assessment, the attitudes of the personnel involved, the number of professional personnel available for help or consultative services, and many other things combine to cause the complexity. There are several possible sources of information but the manner in which information could be gathered from these would have to be determined at the Cooperative level.

Systematic Observations. Observations over a relatively long period of time can be useful in learning about exceptional children and adolescents. However, organizational patterns of our education systems serve to eliminate the possibility of many different types of professional personnel doing the observing. The observation in public schools could be done only by the classroom teacher except in very special cases. Experience has shown that classroom teachers may not be the best decision makers with respect to children in their classrooms. Those students creating problems with the class tend to be selected even though other indications do not point toward an area of exceptionality. However, with proper training and proper guidance, the classroom teacher could become a source for identification of exceptional children.

School Records. Cumulative school records can furnish useful data in identifying potential learning problems as well as academic and creative ability. Accurate, complete, and objective developmental records for individual children furnish a valuable source of research materials for school personnel. Such records should include achievement test results, evidence of classroom performance, psychological test data, health history, family history, anecdotal records that reveal unusual characteristics, and other data deemed useful.

Achievement Tests. Achievement tests have been developed to measure the amount of information, knowledge, understanding, or skill that a pupil has acquired in certain areas. These tests have been developed for all traditional subjects, such as reading, language, arithmetic, spelling, and science. There also are tests that cover the various subjects of the secondary school curriculum. Some standardized achievement tests actually are batteries of subtests that cover the major academic fields of learning.

The California Achievement Test, the Cooperative General Cultural Test, the Iowa Educational Development Test, the Metropolitan Achievement Test, and the Sanford Achievement Test are examples of test batteries. Educational testing or the use of achievement tests in education is not new. However, the vast amount of research done in this area has created many new devices for use. Many of the tests may be used with handicapped children.

Intelligence Tests. Since intelligence as an inborn capacity is largely an abstraction, any attempt to measure it must be based upon functional definition or set of assumptions. Many standardized tests have been developed after a certain set of assumptions have been made. The educator must remember to gain a thorough understanding of those assumptions before using the data obtained from these tests. Examples of intelligence tests are: the Wechsler Intelligence Scale for Children, the Stanford-Binet, and the Otis Quick Scoring Alphas Mental Test. Other tests such as the MacQuarrie Test for Mechanical Ability attempt to measure aptitude in a manipulative manner by requiring no reading. It is suggested that an executive director make use of the specific standardized tests for achievement and intelligence that are being used currently within his area unless it can be shown that different tests would give more valid results.

Measuring Personality. Three widely used methods for measuring personality and personality adjustments are:

- Personality Inventories,
- Rating Scales,
- Projective Technique.

Personality inventories are self-rating questionnaires that deal not only with overt behavior, such as that found in emotional display, but also with a person's own feelings about himself as noted in introspection. Tests of this sort may be useful in diagnosis but are of questionable value in general personality measurement. One of the best known personality inventories is the Minnesota Multi-Phasic Personality Inventory which is used to classify people into clinical types.

Rating scales are of two general types. The first may be referred to as the rank order type since the individual is ranked for some trait or characteristic with reference to others being rated. The second type has been referred to as the graphic rating scale. The individual is rated graphically along the line for some trait with numbers or verbal descriptions being placed at the points where he seems to belong. For example, the child may be rated for thoughtfulness as: often thoughtful, usually thoughtful, sometimes thoughtful, seldom thoughtful, or never thoughtful.

Projective techniques avoid direct questions and subjective ratings in an effort to arrive at the nature of personality. In these procedures the subject is confronted with a stimulus for the purpose of so ordering his perceptions or responses that they will reflect the dynamics and structure of his personality. The best known and most widely studied projective technique is the Rorschach Ink Blot Test.

Because of its intangible and interdependent nature, personality is difficult, and perhaps impossible, to describe in purely quantitative terms. The methods for attempting to measure personality are difficult to apply and therefore probably are limited to use by specially trained personnel. An executive director would be wise to investigate completely any use of this type of material and any results obtained from its use.

Survey. One final method of attempting to identify exceptional children can be termed a "complete survey procedure." This method more or less includes all of the methods and therefore is the most highly recommended. Since it is the most complete, however, it is the most difficult, expensive, and time consuming. This procedure entails a survey conducted by a team of specially trained consultants to identify more thoroughly and completely the problems suggested by teacher referrals or other means. This method would help in eliminating those children who do not fit in any exceptional category and would find borderline cases that were not isolated by the other single means.

An executive director could survey the literature and learn details concerning various types of surveys that have been conducted within the last few years. The specific locale, the available help, the available financial resources, and many other factors would influence the type of survey that could be conducted and the type of results that the survey would produce. The survey no doubt would incorporate information received from several of the other procedures and tests discussed above. Audiometric testing, visual acuity testing, special examination of students with suspected physical disabilities, speech surveys, medical testing, and many other things could be conducted to furnish data in addition to the mental aptitude and personality tests.

Each Cooperative area would have so many possible variables that a general discussion or description of a complete survey is impossible. However, in an effort to furnish a better understanding of this type of procedure, a brief description follows of an effort of this nature that was conducted in the early months of 1971 in an Educational Cooperative area in Tennessee.

Clinch-Powell Special Education Survey

During the winter of 1971 the Clinch-Powell Educational Cooperative in Tennessee conducted a preliminary survey of the exceptional children educational needs in the Cooperative area. This survey was the result of certain planning steps undertaken by the Cooperative.

Early in the 1970-71 school year the Cooperative board selected three priority areas:

- Vocational Education,
- Special Education,
- Early Childhood Education.

With respect to the special education priority, the Cooperative personnel organized a planning session in January, 1971, to establish a course of action. This meeting was attended by:

- The superintendents of the Cooperative school districts,
- Professional employees of the districts (guidance counselors, supervisors, Title III coordinators),
- Representatives of the Tennessee State Department of Education, Division of Special Education,
- Cooperative personnel.

The initial plans for the resulting survey were developed in this meeting.

Additional persons in the state then were contacted, and the result was the selection of the instrument to be used and the process to be followed. The personnel discovered that data already were available for one of the three counties.

The survey was conducted in February and March, 1971, with the following purposes:

- To provide baseline data necessary for subsequent planning of vocationally oriented special education programs,

- To assess the nature and extent of the need for special education services in the two counties having no data by:
 - Determining the number of children with handicaps,
 - Identifying the various types of handicaps,
 - Reporting the findings relative to the number of handicapped children by individual school attendance area and county totals.

The procedures employed in conducting the survey were developed by the ESEA Title III Center in Bristol, Tenn. Basically these procedures consisted of the completion of a survey instrument by each teacher in the school districts. The questionnaire, developed by the center with assistance of the Tennessee State Department of Education, directed the teachers to list exceptional pupils and answer questions concerning their exceptionalities.

The Cooperative personnel were aware that the findings of this survey were only preliminary. The results were limited by the fact that teachers' perceptions of student handicaps sometimes are questionable. In completing the questionnaires, the teachers were asked to rely upon the information at hand and their best judgment. Often, the information available to the teacher was not complete. With respect to teacher judgment, some of the questions were very general, for example, those concerning "hyperactivity" and "excessive quietness."

A copy of the questionnaire and the summations of the findings are included in the Appendices.

Difficulties to Be Encountered, With Possible Solutions

After an executive director conducts a needs assessment in his Cooperative area he can begin to plan specific courses of action. However, unless his area is unique, he should be prepared to face difficult problems from the very beginning. Certain hindrances to the development of exceptional children education are so commonplace in Appalachia that this manual would not be complete without due consideration of them. However, any attempt toward discussing the expected difficulties without also considering ways to help remove such would be meaningless. Therefore, the following material outlines several expected difficulties and suggests possible courses of action for the Cooperative.

A survey of the recent literature failed to locate any particular documentation of specific difficulties for exceptional children education in Appalachia. However, it is only logical that difficulties will be encountered. If difficulties did not exist and had not existed in the past there would be little doubt that activities for the ten percent of the student population classified as exceptional already would have been provided. All data found indicate that this has not been the case. The following discussions involve some of the most generally accepted hindrances to the education of exceptional children.

Lack of Adequate Numbers of Certified Personnel

One of the most common reasons given by superintendents and school boards for their lack of classes and other activities for exceptional children stems from the belief that an adequate number of certified teachers cannot be employed. This, no doubt, will prove to be true in some areas, at least for the next few years. To date, the Appalachian school systems do not seem to have been able to offer equitable salaries and fringe benefits to compete with other areas of the country. Therefore, those teachers trained in some particular area of exceptional children education will be enticed to join school systems out of the Appalachian region.

An executive director may find the majority of teachers who are leaving the university training classes are planning to leave the Cooperative area. If this is found to be the case he could begin to look at various ways in which the Cooperative could provide additional numbers of certified teachers in the exceptional children areas. Inservice education courses, with college credit, could be one answer, especially if there appeared to be a surplus of regular classroom teachers. The Cooperative might be able to encourage more participation than the regular college programs if stipends or other incentives were available. Plans for use of paraprofessional personnel to relieve the small number of certified teachers from mundane duties could be developed by the Cooperative. A review of the current federal funding programs might prove helpful. During the past few years certain programs have made it possible for teachers to get training in specific areas, including special education.

To summarize, if an executive director finds one of the biggest problems facing exceptional children education in his area to be the fact that they cannot get enough certified personnel to conduct needed programs, he should undertake a method or methods to provide more teachers. Up-to-date information on specific scholarship programs for retraining of teachers for exceptional children programs can be obtained from the USOE Bureau of Handicapped Children, Division of Training Programs.

The majority of special classes for exceptional children will be composed of no more than 12 pupils per class. In those situations in which the superintendent is faced with overcrowded conditions he usually is unwilling to give up a classroom to such a small number of pupils. The same classroom space could house 30 to 35 pupils in a traditional program. Even if overcrowded conditions do not exist, many superintendents may be unwilling to support the use of an entire room for just a few students. It is obvious then that the lack of necessary facilities can pose a problem to the development of exceptional children classes and activities. In fact, this could be one of the most difficult problems to overcome. The construction, equipping, and maintenance of adequate classroom facilities are very expensive. If the unit is to be used for only five to ten pupils, the per pupil cost would appear extremely high. The executive director must consider this expense and determine financing possibilities. The portable classroom units now available could provide one possible solution. The executive director or designated representatives should study all available literature in determining ways of renovating facilities already available. It may be found that space exists only if it can be converted for use.

Lack of Adequate Financial Support

The most common reason given for the lack of development of many educational programs is simply, "We do not have the money." Exceptional children education certainly provides no exception. Inadequate financial resources can become a very serious problem in the development of exceptional children activities. For example, as inferred above, the lack of facilities is related directly to financial resources.

However, it appears the lack of financial support is not as critical in the areas of exceptional children education as it is in some other areas in public education. Each of the states within the Appalachian region has separate divisions within their respective state departments that are directly responsible for the exceptional children activities throughout the state. At this time it appears that there may be monies which are not being requested by local districts available through the state departments. The typical procedure used by state departments to allocate monies to local districts involves the use of a system of special education units, allotted to the local districts upon review of application. The application usually consists of statements indicating that: minimum number of students are present needing this type of activity, facilities with minimum standards will be furnished, and a certified teacher will be provided. The

state allocates certain specified amounts of money to finance these activities. In other words, a school system may receive state funds for the operation of exceptional education programs if it can be shown that the district has ample students, ample facilities, and can get a certified teacher. Therefore, in states in which the unit system has been adapted, money, or lack of it, cannot be used as an excuse for not providing exceptional children activities. No doubt there is a limit on the amount of financial resources available at the state level and, as classes for exceptional children become more prevalent, the funds may become more limited or unattainable.

It will be the responsibility of the executive director to determine the status of funding from the state and other sources and to make plans to see that available monies are directed toward this Cooperative area. Informative materials can be obtained from the state department with respect to funding guidelines and other information. Individual states have differing or unique programs with their own labels, titles, and descriptive information. To illustrate the differences involved, the exceptional children categories in which monies are allocated for two states, Tennessee and Pennsylvania, follow. The similarities and differences can be noted.

Tennessee:

- Homebound,
- Hospitalized,
- Multi-disabilities,
- Speech and/or hearing,
- Visually handicapped,
- Educable mentally retarded,
- Severely mentally retarded.

Pennsylvania:

- Physically handicapped,
- Hearing impaired,
- Speech handicapped,
- Visually impaired,
- Inferior intellectual endowment:
 - Educable mentally retarded,
 - Slow learners,
 - Trainable mentally retarded,

- Superior intellectual endowment:
 - Academically able,
 - Gifted,
 - Special talents,
- Emotionally disturbed/socially disturbed.

The list indicates, for example, that an executive director in Pennsylvania may find more willingness on the part of the state department to offer assistance for training gifted students than would a director in Tennessee. Therefore, a complete understanding of the state department's activities in exceptional children education becomes mandatory for the executive director or designated personnel.

Lack of Sufficient Pupils to Constitute a Classroom Unit

The data given in Chapter 1 of the manual indicate that this problem should be nonexistent in many districts. The data suggest that the results of a detailed survey would indicate that pupils do exist who need special services. However, in small rural districts in which the total student enrollment easily could be less than 1,000 pupils, local school systems may find an insufficient number to constitute the minimum enrollment for a special class. However, the systems probably will have at least one or two pupils needing special services. This situation provides the environment for one of the most obvious ways an Educational Cooperative could become involved in the education of exceptional children. If the Cooperative would develop programs in which the students needing special education could be brought across district lines and combined with other children with similar needs, the size of the classes would become realistic. The enrollment figures would approach or meet the state's minimum standards. Again, the unique characteristics of the Cooperative area would influence the type of program that could be planned. The size, location of the pupils, location, and availability of facilities, and type of problems needing help are some factors that would have to be considered in the planning. This type of activity appears to have the greatest support from the state departments' exceptional children personnel and others within the state educational systems. In fact, this appears to be one common exceptional children activity most readily adopted by Educational Cooperatives or other regional agencies.

Lack of Interest and Support From School Personnel, Parents, and General Public

This retarding factor would have required much greater consideration 20 or 25 years ago. Interest in education for the exceptional ten percent of today's youth has grown considerably within the past few years. Legislators, state department officials, school officials, parents, and other

interested individuals appear to be more interested in this area of education than in the past. The state plans for mental retardation just discussed is evidence of the increase in interest. However, even with the existence of these new attitudes, the executive director may find the traditional lack of interest to be a problem in his area. Superintendents and boards of education still are working with limited resources. It is easier for them to plan programs for the majority of pupils and omit emphasis in the education of the few exceptional ones. An executive director should be aware of this possibility and should conduct any type of public relations activities deemed important and necessary.

Chapter 3

Additional Areas of Cooperative Involvement

The material in Chapter 2 indicates that an executive director can anticipate many problems or difficulties in establishing exceptional children education activities within this area but that there are possible solutions and ways to remove the difficulties. Some possible suggestions for solutions were provided. In this chapter brief descriptions of other activities which the Educational Cooperative might undertake to help provide exceptional children education will be given. The descriptions certainly are not all inclusive; an executive director very easily may determine other ways to involve the Cooperative or change or add to the ideas suggested.

Activity One—Exceptional Children Coordinator

An Educational Cooperative could, and perhaps should, employ a professional to serve as director or coordinator of all exceptional children activities. If a Cooperative is going to become involved to any appreciable extent in offering exceptional children services and activities to the school districts within the area, the executive director soon will find that he is unable to devote a large enough percentage of his professional time to the required tasks.

Kirk (1962, p. 372) has provided a brief description of functions to be performed by exceptional children directors and supervisors. The wide range of suggested duties to be performed in this position indicates the need for a full-time person.

A breakdown of the local director's time follows:

- About a third of the director's time (37 percent) was spent in preparing and reviewing reports and budgets; interviewing applicants for special education positions; setting criteria for membership in placement of youngsters in suitable facilities; and general consultation with state and federal personnel, other school administrators, parents, and community agency representatives.
- About a fourth of the director's time (28 percent) was spent working directly with teachers of exceptional children; in curriculum planning; and in consultation with physicians, school nurses, curriculum supervisors, and regular teachers and supervisors.
- About 13 percent of the director's time was spent in serving children through individual and group testing, counseling, case study, teaching of exceptional children, making home calls, arranging clinic appointments, job placement, and follow-up.
- The remainder of the director's time was given to public relations, inservice training of teachers, study, and research.

The director or coordinator could expect assistance from local school personnel, including supervisors and teachers, the Cooperative executive director and personnel, state department of education personnel, and university or college personnel. The line and staff relationships of the position would be determined by the administrative organization of the specific Educational Cooperative. If this level of organizational sophistication has been achieved, the position probably would be in the curriculum and instruction subsystem of the Cooperative.

Another listing of suggested activities to be delegated to the director or coordinator of exceptional children education was given by Chandler and Bertoleate (Witty, 1967, p. 312).

Their list of a director's activities include:

- To furnish leadership in developing and carrying forward an effective program of instruction through studying curriculum needs school by school, and to coordinate the services of all directors, principals, supervisors, teachers and other employees, and the work of all committees within their respective districts.
- To work with schools and communities in respect to evaluating present facilities and making recommendations for improvements.
- To approve reports and make recommendations regarding personnel, school budgets, and school organization in the districts.

- To make decisions with regard to the issuance of out-of-district permits.
- To make a systematic visit to all schools in the district.
- To exercise leadership in promoting public relations within the districts, to be the chief education officer in the district representing the center office, and to perform such other related functions as may be required.

This list, although similar, further substantiates the idea that this type of position would be quite complex, requiring a great deal of time.

Activity Two—Curricular Materials Evaluation

An Educational Cooperative could endeavor to locate and evaluate curriculum materials in the various categories of exceptional children education. A brief survey of recent literature indicates that many curriculum developmental projects and other activities are being conducted. Any attempt to document these projects soon would be obsolete. There follows, however, a description of three promising developments which will serve as examples of the type of developmental activities that are being conducted now.

Social Learning Curriculum for the Educable Mentally Retarded. This curriculum has been developed by the Curriculum Research and Development Center in Special Education at Yeshiva University in New York City. To date, 11 phases of the curriculum for primary educable mentally retarded students have been developed and field tested. These are ready now for adoption by special education teachers at the primary level. Intermediate phases now are being field tested and will be available for adoption upon completion. The Social Learning Curriculum represents a departure from traditional concepts of curriculum for the retarded. However, the departure is only in the sense that primacy is given to the concepts and facts that lead to (and are integral with) those knowledges and behaviors that appear to be consonant with broad assimilation in the society at maturity.

The curriculum makes no claim of innovations in the substantive elements of curriculum, namely, mathematics and reading instruction. Instead, it represents a selection and organization of substance that purports to be in harmony with the goals of education for the retarded. The social, physical, and psychological aspects of the needs of the educable mentally retarded are used as a foundation for this curriculum.

The primary curriculum consists of 11 phases, each of which contains specially prepared materials for the teacher's use. The 11 phases are: maintaining body functions, identifying helpers, attaining social skills, developing motor skills, communicating with others, recognizing what senses do, recognizing and reacting to emotions, recognizing the body, recognizing dependence, understanding the environment, and perceiving individuality.

The complete curriculum is designed to provide social learning materials for an educable mentally retarded class at the primary level for three years. Although the materials are only now in the hands of the printer, the estimated costs would be somewhat over \$100, a small amount when considering the three-year use span. It is suggested that Yeshiva University be contacted for further information.

Curriculum, Research, and Development Center in Mental Retardation
Department of Special Education
Ferkau Graduate School of Humanities and Social Sciences
Yeshiva University
55 Fifth Avenue
New York, N.Y. 10003

The BSCS Me Now Science Program. Me Now is a science program for educable mentally handicapped youngsters ten to 14 years old developed by the Biological Sciences Curriculum Study. The experimental edition has been successfully field tested and the materials will be ready for general use in September 1971. The program is:

- A science program that requires almost no reading and has no student text,
- A series of activity-centered science concepts wherein students become actively involved in doing,
- A sequence of activities, at first concrete and tangible, then moving in small, discrete steps to the abstract level,
- A building-block approach to higher cognitive levels, with behavioral objectives and teacher strategies mapped out to aid student growth,
- A programmed format that can be followed easily by any teacher, including those without a science background,
- A sequential scope of activities that fit into daily teaching strategies.

The program consists of the following units:

- Digestion and Circulation,
- Respiration and Body Wastes,
- Movement, Support, and Sensory Perception,
- Growth and Development.

A science apparatus kit that includes the materials difficult to obtain is provided for the teacher. Other materials are being prepared. To date, materials are available for a two-year instructional block in the life sciences. Further information can be obtained from:

The Biological Sciences Curriculum Study
P.O. Box 930
Boulder, Colo. 80302

The SRA DISTAR Instructional Systems. The Science Research Associates have developed three instructional systems for use at the primary level in the teaching of language, reading, and arithmetic to children having experienced trouble in learning. The children may be unable to keep up with classmates for various reasons: mental retardation, cultural deprivation, immaturity, physical handicap, etc. The programs are designed to teach basic concepts at a fast pace so that children who start out behind average youngsters can catch up.

The DISTAR Reading Program is designed to teach children the skills they need to read. It consists of two consecutive parts:

- Reading I - concentrates on basic decoding skills necessary to look at a word, sound it out, and say it;
- Reading II - emphasizes comprehension and advanced reading skills.

The DISTAR Language Program is designed to teach basic language concepts and skills. It consists of two consecutive parts:

- Language I - focuses on the language of instruction, the language the teacher uses in the classroom,
- Language II - emphasizes the teaching of the skills children need to analyze language and to use them to describe qualities and relationships observed in the world around them.

The DISTAR Arithmetic Program is designed to provide a basic understanding of arithmetic and the skills necessary to attack and solve problems. It consists of two parts:

- Arithmetic I - the student is taught to count, follow directions, identify, understand, and use numerals, and is taught other skills that prepare him for the basic operations of addition and subtraction, for the more complex operations of solving story problems and algebraic problems,
- Arithmetic II - stresses independence in problem solving. Materials for these programs are available from SRA. These include the basic kits, teacher materials, student workbooks, and take home materials.

Science Research Associates, Incorporated
259 East Erie Street
Chicago, Ill. 60611

This manual in no way endorses any or all of the described programs. They were included as examples of the activities being done in special education curricula and should be evaluated in relation to specific needs of the Cooperative area.

Activity Three--Exceptional Children Facility Planning and Development

If an Educational Cooperative becomes involved in exceptional children education, the Cooperative or some of the school districts within the Cooperative area probably will have to begin planning for construction or renovation of facilities for use in the planned programs. A Cooperative employee having skills and expertise in facility planning would be very helpful in this respect. Again, the amount of literature available for help in this area is voluminous. Any decision in the facility or equipment areas must be based on specific knowledge gained from the districts involved and a knowledge of programs being considered. The state departments of education have requirements to be met; their guidelines should be very helpful in planning.

The planner may find that the renovation of existing classrooms and other facilities is the best solution or it may prove more satisfactory to construct new facilities on a permanent or temporary basis. The use of movable classrooms is gaining popularity in all areas of education. Mobile facilities such as vans, buses, roving laboratories, etc., could be beneficial to certain Cooperative based programs. For example, the development of a Cooperative diagnostic team (to be discussed in a later section) requires some type of central office facilities and/or mobile facilities for work in the field. All of these possibilities must be considered.

An example of the type of information that can be found in the literature is given in the article "Out-of-the Classroom" in Exceptional Children, April, 1967. It should be remembered that this facility is being recommended for a specific type of handicapped child--the disturbed child.

This article gives, in detail, a description of a special facility for disturbed children. Part of the description follows:

Components of the room. A room becomes the framework for communication between the teacher and child and between child and child. . . . Every aspect of the physical environment in classrooms for disturbed children should be examined in the light of the special needs of the children. These aspects include size and shape, sound control, lighting, color, storage facilities, use of wall space, and furniture and its arrangement.

Location. The most desirable room is in a quite lightly used section of the building apart from the comings and goings of a large number of children.

Size. The 30 to 40 square feet of floor space per child which was accepted as a guide for classroom size in the past is no longer considered adequate. . . . A more appropriate space allotment is 55 to 65 square feet minimum per child with a minimum of 450 square feet for even the smallest group.

Shape. In designing or selecting classrooms serious consideration should be given to nonrectangular rooms, e.g., L-shaped rooms, rooms with nooks, or two adjoining rooms with an open doorway between them. These rooms allow for more variety in activities yet protect against over stimulation or constant rearrangement of furniture.

Sound control. Arrangement of work centers must be considered. How many work centers with a high level of sound such as wood working and block building can a room house, what kinds of work centers can be adjacent to one another, which children can work together?

Furniture. Fixed furniture does not lend itself to the flexibility needed in the special class. The furniture which shifts too easily is also inappropriate. Heavy movable furniture with desk and seats attached probably is most appropriate for hyperactive children or those who have problems in space orientation. To allow for individual differences, desks and chairs can be ordered in three sizes rather than in one standard size unless adjustable.

Use of wall space. Bulletin board displays are important tools of communication by which the teacher makes concrete recognition and respect for the children, their efforts, and their achievements. . . . chalk boards are excellent devices for helping children learn.

Color and light. For many children a light, bright, and colorful classroom is a happy change from a dreary and disordered home. Some children are particularly affected by a depressingly dark and dreary environment. While a cumulative, daily disarray and untidiness should be accepted without fuss, each morning should begin with a fresh, clean, and well-ordered room.

Conclusion. A room is going to be used either well or badly. It is going to contribute to the difficulties which a class of disturbed children already have or it is going to facilitate their growth in living and learning together. Sensitivity to the implications and effects of specific aspects of the physical setting is the best assurance that the physical setting will be used constructively (Hay, 1967, pp. 577, 579, 580).

Activity Four—Development of a Cooperative Diagnostic Team

Various programs financed by federal projects such as ESEA-Title I and the education of the handicapped Title VI have been based upon the development of a central staff of professional and paraprofessional employees. They have been designed to supplement the ongoing special education programs within the school districts and to offer new services, especially in the areas of diagnosing and segregating children for the exceptional children's classes. The literature reveals numerous examples and organizational structures for such teams. Jordon (1965, pp. 31-38) describes eight roles that would fit well into a Cooperative exceptional children team. A complete description of each of these roles is given. His list includes:

- Supervisor or director of special education activities,
- School nurse,
- Reading specialist,
- Speech and hearing therapists,
- Vocational Rehabilitation counselor,
- Social worker,
- Psychometrist,
- School psychologist.

Cruickshank (p. 684) is more general in his approach to a diagnostic team:

The diagnostic team is composed of a number of well trained individuals from various disciplines. Medical specialist, psychologists, social workers, speech and hearing consultants, guidance workers, and school and public health nurses serve as essential elements of the team who work together for the purposes of determining proper school adjustments and services for handicapped children.

Two examples of regional exceptional children teams are explored.

St. Louis County, Missouri. The special school district of St. Louis County, Missouri, is a regional agency not dissimilar to any other school district. It is controlled by a board of education, and the superintendent has overall administrative responsibilities for the district. This position would be similar to the special education director or coordinator. In order to implement the various phases of an educational program, assistant superintendents and coordinators have been employed who are responsible for specific facets of the program. One assistant superintendent in charge of the program for mentally retarded children has the responsibility for this phase of the program.

The district has employed three curriculum consultants, five principals, and two assistant principals to assist in the supervision of the instructional program in this area. In addition, two job placement consultants are employed to assist in the employment of older educable mentally retarded children. These two consultants work with the Vocational Rehabilitation counselor in obtaining further vocational training for many of the children in the area.

Another assistant superintendent was employed to serve the area of speech, hearing, and research. The district employed a supervisor of the speech correction program as well as a supervisor for the auditory impaired child. The audiologist employed on a full-time basis, works with the assistant superintendent in this area. A supervisor of speech and language development was employed to supervise a staff of clinicians working with retarded, orthopedic and auditory impaired children. A full-time person was employed to carry on the hearing testing program and to retest the more severe cases at a later date. A coordinator was employed to direct the educational programs for the orthopedic and handicapped and children with visual problems.

A number of people were employed to come under the heading of psychological and social services. This area was directed by a coordinator who serves as director of the clinic and supervises and directs an educational program for the hyperkinetic child. As director of the clinic this person coordinates the work of a number of school psychological examiners, social workers and a psychometrist. This group provided the district personnel with the basic psychological and social information necessary to make proper placement of the children in classes and to maintain contacts with other social agencies.

An assistant superintendent was employed to serve the area of vocational and technical education. Several other people were employed to do specialized jobs which cut across all areas. One of these was the supervisor of the home teaching

program. This person is responsible for the selection of home teachers and the direction of the home teaching program in terms of the quality of instruction and reporting to both the child's home, school, and state department of education. A consultant in the area of physical education to work with teachers in all areas on the improvement of physical education programs also was employed.

An assistant superintendent to be in charge of business administration was employed. This area was responsible for the purchasing of supplies and equipment and keeping an inventory to safeguard the districts properties. Various personnel were employed in this capacity. The district employed two medical consultants, pediatric, and orthopedic to assist in the placement of children in the proper programs and to supervise the medical aspects of the district programs. The district employed four nurses who cooperated with the County Health Department (St. Louis County, 1966).

DILENOWISCO Special Education Services. DILENOWISCO Special Education Service, a part of the regional DILENOWISCO Educational Cooperative, serves five school divisions which include the counties of Dickenson, Lee, Scott, and Wise, and the city of Norton.

A five-member staff is responsible for the Special Education Service: director who coordinates the activities of the team; psychologists who conduct the psychological testing program necessary for the placement of children in special education classes; educational consultant whose educational testing and recommendations aid the teachers in setting up a curriculum for the child who was referred; social worker whose contact with the home provides necessary information concerning the child's developmental history; and a speech therapist who diagnoses speech defects, provides therapy, and gives suggestions to school personnel in order that they may continue working with the child and his difficulty on a daily basis.

Acting as a multi-disciplinary team, these staff members encourage and assist school divisions in their efforts to plan and develop educational programs for handicapped children (DILENOWISCO, 1970-71).

It is evident that the operation described is large and complex. It is doubtful at this time that an Educational Cooperative will become so involved in exceptional children education. However, the example does show various areas in which specialist personnel can be valuable assets.

Activity Five—Organization of a Paraprofessional Staff

As indicated in Chapter 2, one of the major difficulties that may hinder implementation of exceptional children education within the public school districts is the fact that there are not enough trained and certified teachers. Many projects and reports in the field of general education are suggesting that the use of aides in the classrooms can relieve the teachers of a tremendous amount of work and therefore facilitate the professional tasks of instruction. There seems to be no reason why this could not also be true in the exceptional children areas. However, a reviewer will find much less literature available on this particular subject than on the areas mentioned above. The available literature does seem to indicate that the use of paraprofessionals can provide an opportunity for the professionally prepared teacher to utilize her skills more fully. This infers that a school district cannot afford to have professional persons expend valuable time with duties that can be done just as well by unskilled or semiskilled people. Blessing (1967, pp. 110-111) presents a projected list of functions for paraprofessionals within the exceptional children classes. These functions follow:

Clerical

- Take roll call; make daily attendance report to principal's office.
- Collect and keep records on any special money, such as pictures, Junior Red Cross etc.
- Assist in duplicating teacher-prepared materials for class use.
- Assist in such secretarial work as making pupil lists for eye tests, dental surveys, etc.
- Type tests and other materials already prepared by the teacher.
- Keep records of textbooks.
- Assist in keeping health records, weighing, and measuring children.
- Assist in checking out library books and keeping records.

Lunchroom

- Take lunch and special milk count; make daily report to cafeteria.
- Assist a teacher during lunchtime, thus relieving one teacher. Supervise and help the children and encourage them to eat well.

Classroom

- Prepare classroom for use each morning--proper ventilation, lighting, put everything in order for the day--emphasize neatness.
- Keep bookshelves, reading tables, and chairs in reading circle orderly, books and workbooks arranged neatly.
- Assist children in keeping desks and storage places neat.
- Prepare for use and return to proper storage places needed teaching aids, such as filmstrips, record player, etc.
- Keep teaching aids in neat storage and prepare for use when needed by teacher; return to orderly place when no longer needed by teacher.
- Assist in assembling, putting up, and dismantling bulletin board displays; keep them neat, refreshed, and current.
- Maintain a neat classroom at all times.
- Keep chalkboards clean and ready for use.
- Assist in caring for plants, aquariums, etc.

Playground

- Supervise children passing from classroom to playground.
- Prepare and assemble materials for games, etc.
- Assist in physical education activities.
- Assist in supervision of playground with other teachers on duty; relieve one teacher at a time.

Teacher

- Assist in use of filmstrip projector, filmstrips, record player, and other audiovisual aids.
- Consult with librarian and make it possible to utilize more fully the materials from the library in enriching a unit being taught.

- Assist teacher by helping small groups of children understand and follow instructions on seatwork while she works with another group uninterrupted.
- Assist in art classes in order that more media may be used; prepare materials in advance, such as mixing paint, cutting paper, sorting and gathering materials.
- Assist in group and individual science experiments.
- Read stories for children during story time, rainy days, or when a child needs individual attention.
- Assist teacher in making files, keeping them in order, mounting pictures, etc.
- Maintain order if the teacher is called from the room for a few minutes.
- Assist the teacher in accompanying class on field trips.
- Make charts and word cards as directed by the teacher.
- Assist the teacher in individualized programs of study.
- Provide individual help and direction for programmed materials.
- Provide direction in concrete aids for mathematics.

Pupils

- Assist children in removing and hanging wraps, in reclaiming the correct ones when needed at the end of the day, in providing for neat storage of the same during the day.
- Assist in supervision of pupils passing to and from special classes such as music, physical education, library.
- Supervise bathroom breaks so that the teacher may continue with small group work uninterrupted.
- Accompany individual children to the school clinic, dental clinic, etc., when necessary.
- Distribute and collect student papers.
- Assist with bus duty (at least one classroom teacher on duty).
- Observe children for indications of illness, emotional problems, physical defects, and extreme fatigue.

- Work with children during leisure and recreational reading activities.
- Work with children when special practice is needed after skills have been taught by the classroom teacher.
- Be aware of children's intellectual needs through conversation with them, listening to their stories and experiences. Children need good listeners.

Blessing (p. 112) further supports the view concerning the use of paraprofessionals by listing four major aide levels for which employment could be undertaken. He also provides a brief description of each of these levels. The levels are:

- Assistant teacher,
- Instructional aide,
- Supervisional aide,
- Clerical aide.

Activity Six—Inservice Training

An Educational Cooperative could provide resources and training programs for special education personnel. These programs could take many forms including the following:

- Preschool workshops for teachers,
- Preschool workshops for administrators, psychologists, and program coordinators,
- Special group meetings for teachers to introduce them to available resources and materials,
- Coordination of efforts involving teachers, administrators, university personnel, and out-of-district persons to help in program development,
- Teacher demonstrations,
- University or college credit courses in the area of exceptional children education.

Activity Seven—Parent Education

Perhaps one of the most interesting programs which could be conducted by an Educational Cooperative in the area of exceptional children would be

an effort directed toward the education of parents. Attempts toward parent education could take many forms and would have to be developed with consideration of the specific needs and facilities of the area. Meetings or sessions could be planned under the leadership of a psychologist or educational specialist of some type. Program materials could be obtained for use in various areas. Audiovisual materials might be used to a good end in these endeavors. The programs could be planned for the general public or for parents whose children were being given special education or had been referred for special education activities.

Activity Eight—Resource Center

The Educational Cooperative could plan and develop a materials center or library for exceptional children education. These terms are self-explanatory and little discussion seems necessary. The high interest shown in exceptional children education at the federal level has produced materials in abundance. A carefully coordinated center could enable these materials and others developed at state and local levels as well as those from private companies to become readily available to all persons working in exceptional children education within a Cooperative area.

Activity Nine—Provide a Proving Ground

The personnel of an Educational Cooperative interested in the education of exceptional children could consider themselves as a consortium of personnel coupled with representations from state departments of education, parent and community groups, and universities dedicated to providing a proving ground for some of the proposals made by special education researchers and idea people. To date, the exportation on behalf of change and special education curricula to enable exceptional children to achieve their full potential has been ignored in most instances. (Ruslalem and Ruslalem, 1971, pp. 184-6). Much of the current special education is worth retaining, but the new concepts show need for change. Some of the changes would require massive infusions of money, personnel, and talent that are not currently available, and the present system is supported by funding bodies and an educational community that are reasonably well satisfied with things as they are.

If an Educational Cooperative became involved in a change effort in the field of special education, the personnel would begin to assemble reports from all possible sources concerning some of the more important divergent concepts in the field. They would select one or more of these formulations for impartial tryout during a school year using demonstration evaluation designs prepared in cooperation with university and state departments of education personnel. The site for the demonstration would be selected from the cooperating school districts on the basis of particular needs and other measures of appropriateness and the demands of the design. Throughout the school year the Cooperative staff would assist and monitor the experimental implementation project and share in the evaluation. After the selected project had been assessed by the Cooperative and other evaluators, recommendations for broader use in the Cooperative area could be

developed. Plans could be prepared for possible adoption by the individual cooperating school systems in the geographic area or, if merited, plans could be made for specific cooperative programs. To facilitate these efforts, the Cooperative could establish dissemination mechanisms through which the experiences and findings could be made available to the administrators and practitioners in the area. This type of effort on the part of an Educational Cooperative would make certain that at least a minimum of change effort was being exerted in the geographic area.

Activity Ten—Adoption of the Use of Media Systems

The technological advancements that have been made within the past few years have opened the doors to many new teaching methods and techniques. There can be no doubt that many of the new uses of media and other technological adaptations can become important innovations in exceptional children education. Some adaptations are quite obvious; for example, the use of electronically amplified speech with children whose hearing loss is moderate to severe and the use of electric typewriters for some handicapped children are easy to comprehend. However, the majority of adaptations would require a great deal of study in the particular area being considered. The use of language laboratories, photography, closed circuit educational television, telephones, and other media should be considered as the need arises.

One publication that could prove to be a great deal of help to the executive director is Audiovisual Instruction published by the Department of Audiovisual Instructions, National Education Association. For example, the November, 1969, issue is devoted entirely to the role of media in special education. The contents of that issue include, in part, the following:

- Media systems and the handicapped child.
- Programmed instruction and the exploration into its effectiveness with the handicapped child.
- A national center for education media and materials for the handicapped.
- Video tape and special education.
- A world of knowledge through sound.
- Expanding limited lives with media.
- Preparing media professionals for school for the deaf.
- A material media laboratory for special education teachers.
- The instructional materials center network for handicapped children and youth.

- The CEC Information Center on Exceptional Children.
- Can movies be used to study and help the handicapped?
- Teaching the deaf with photography.
- Analyzing student behavioral patterns with CC television.
- Utilizing ITV for performance classes.

Another publication, Educational Technology, also could prove to be most helpful to a Cooperative director. For example, the August, 1970, issue is devoted to the "Education of the Handicapped and Educational Technology."

Summary

These suggestions do not include all possibilities. A Cooperative executive director may find other activities to be more beneficial in his particular area. Also the activities listed are not assigned any priority ratings, with the exception of the initial needs assessment. The specific nature of the Cooperative needs and resources will influence the selection of particular activities.

There is no reason to believe that any particular Cooperative could not conduct several of the suggested activities, or others, instead of limiting the efforts to one or two areas. In fact, reviews of programs being conducted by regional agencies reflect the fact that several activities can be implemented in coordination with each other. For example, the "Mod Center" project sponsored by the Unified School District Number 233, Olathe, Kan., has incorporated at least five of the listed activities into one effort. A description follows:

The Educational Modulation Center, often referred to as the "Mod Center," is an ESEA Title III project serving 10 unified school districts, the parochial schools, and the communities of Johnson, Franklin, Miami, and Douglas counties in Northeast Kansas. There are approximately 16,000 students in the service area which is 45 miles in diameter. An additional 46,000 students in the northeast corner of Johnson County receive indirect services from the Center. Services provided by the Mod Center include: a materials depository, inservice training for parents and teachers, methods and materials consultant/teachers, psychological evaluations, research, and dissemination of all available information pertaining to the project.

The purpose of the Mod Center is to effect a procedural model whereby children having educational problems may be provided with an efficient program and remain in the regular classroom.

The basic goals of the Mod Center are designed to effect new procedures for assisting children with educational problems. The Center's educational team is composed of school psychologist, consultants, and hearing conservationists. Materials analyses, prescriptions, retrievals, cooperative special education programs, and research are all part of the team's work.

The Mod Center operates on a student referral basis, starting at the teacher level (Convention of the Council for Exceptional Children, 1970).

Other examples of regional programs in exceptional children education could be reviewed. An executive director should endeavor to learn of programs being conducted with goals similar to his planned efforts. Brief reviews of other Cooperative programs are included in the Appendices.

Whatever direction an executive director's actions may take toward exceptional children programs, he must exercise care in program selection and development. There must be a realistic basis for any special education program. Without careful preplanning and continuous reevaluation of the program, it will be doomed to failure or will grow unrealistically. Cruickshank and Johnson (p. 123), in working against such occurrences, list eight essentials for a minimum program for the education of exceptional children:

- Diagnosis and selective placement,
- Early discovery,
- Survey and continuous census,
- Psychological services,
- Staff orientation,
- Continuous guidance and counseling services,
- Assistants for teachers,
- Adequate transportation facilities.

Cooperative personnel and board members who contemplate an exceptional children program must carefully appraise each and all of these essentials.

Chapter 4

Further Sources of Information

Various agencies and sources of information for assistance in exceptional children education have been indicated throughout the first chapters of this manual. An executive director soon will learn that there is an abundance of materials available and that one of his duties will be to select carefully the materials deemed most helpful and eliminate the others.

In addition to those sources mentioned there are other agencies and organizations that provide assistance to various types of handicapped or exceptional children. A brief description, with addresses, of these agencies follows.

The Instructional Materials Center Network for Handicapped Children and Youth

This network is a federation of regional Instructional Materials Centers (IMCs) whose primary clientele is the special educator and whose region of service is the continental United States, Alaska, Puerto Rico, Hawaii, and the Virgin Islands. The network consists of 14 instructional materials centers and the Council for Exceptional Children, Eric Clearinghouse on Exceptional Children. Each regional center has developed regional satellite centers, either stationary or mobile, having simple or elaborate service structures depending on local needs, resources, and commitments. For example, the IMC located in Lexington, Ken., serving all areas of exceptionality in Kentucky, North Carolina, Tennessee, and West Virginia has established affiliated centers in all of these states. To further illustrate the example, the Kentucky center offers the following services:

- A materials library,
- Demonstration services,

- Dissemination services through a free newsletter, the UKRSEIMC quarterly,
- Consultation services,
- Materials development,
- Evaluation.

The addresses for the IMCs serving the Appalachian region are as follows:

Kentucky

Dr. A. Edward Blackhurst, Director
University of Kentucky
Regional Special Educational Instructional Materials Center
641 South Limestone Street
Lexington, Ken. 40506

Regions served: Kentucky, North Carolina, Tennessee, West Virginia.
Services all areas of exceptionality.

Michigan

Mrs. Lou Alonso, Director
USOEMSU Instructional Materials Center
for Handicapped Children and Youth
343-B Erickson Hall
Michigan State University
East Lansing, Mich. 48823

Regions served: Indiana, Michigan, Ohio. Services all areas of exceptionality.

Pennsylvania

Dr. Raymond Cottrell, Director
Department of Special Education
George Washington University
820 20th Street, N.W.
Washington, D. C. 20006

Regions served: District of Columbia, Delaware, Maryland, New Jersey, Pennsylvania, Virginia. Services mentally retarded, crippled, health impaired, emotionally disturbed, and speech impaired.

A list of all centers will be provided in Appendix D. It is strongly recommended that an executive director interested in becoming involved with exceptional children education contact the IMC in his area to determine the specific services available.

The Council for Exceptional Children

This Council has major concern for those children and youth whose instructional needs differ sufficiently from the average to require special services and teachers with specialized qualifications. Types of children with whom the council is concerned include the mentally gifted, mentally retarded, visually handicapped, auditory handicapped, emotionally handicapped, socially maladjusted, crippled, neurologically impaired and some with speech defects, special health problems, and reading disabilities. This organization publishes several documents, including:

- Exceptional Children. A monthly journal for the General Association which focuses on research programs, issues, and trends in special education.
- Insight. A monthly periodical, which provides legislative and other information useful to administrators in planning programs.
- Teaching Exceptional Children. A quarterly journal which contains articles on methods and materials for use in the classroom.
- Education and Training of the Mentally Retarded. A quarterly journal representing the CEC Division on Mental Retardation. Its articles relate specifically to the field of retardation.
- Other publications, including more than 30 available titles.

The Council also maintains an Information Center to provide information to special educators about recent findings related to exceptional children. The Center is composed of three units:

- Information Processing Unit. This unit regulates computer storage of educational information and answers information requests.
- Information Products Unit. This unit develops information, summaries, reviews, and other products for the special education community.
- Information Utilization Unit. This unit selects, develops, and delivers information that has practical implication for classroom practice.

The Information Center publishes a quarterly journal, Exceptional Child Education Abstracts (ECEA), which is available by subscription. The Center has available a series of bibliographies on selected exceptional children education categories. Articles on each topic are abstracted, with short descriptions and sources of obtaining copies. A list of available bibliographies is included in the Appendices.

Information can be obtained by contacting:

The Council for Exceptional Children
Suite 900
1411 South Jefferson Davis Highway
Arlington, Va. 22202

Other Sources

The Mental Retardation Journal
The American Association on Mental Deficiency
5201 Connecticut Ave., N.W.
Washington, D. C.

John Day Special Education Books
John Day Publishing Company
62 West 45B Street
New York, N.Y. 10036

Appendix A

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1970

National Association of Coordinators
of State Programs for the Mentally Retarded, Inc.

ALABAMA

Assistant Commissioner for
Mental Retardation
502 Washington Avenue
Room 208
Montgomery, AL 36104
Tel: 205/269-7387

COLORADO

Division of Mental
Retardation
206 State Services Bldg.
Denver, CO 80203
Tel: 303/892-3518

ALASKA

Coordinator for Mental
Retardation
Room 217, MacKay Building
338 Denali Street
Anchorage, AK 99501
Tel: 907/279-6684

CONNECTICUT

Deputy Commissioner of
Health
79 Elm Street
Hartford, CT 06115
Tel: 203/566-2617

ARIZONA

Department of Mental
Retardation
1802 West Jefferson Street
Phoenix, AZ 85007
Tel: 602/271-5775

DELAWARE

Committee on Retardation
Programs
Division of Mental Health
and Mental Retardation
Department of Health and
Social Services
New Castle, DE 19720

ARKANSAS

Department of Mental
Retardation
Arkansas Children's Colony
Conway, AR 72032
Tel: 501/329-6851

DISTRICT OF COLUMBIA

Associate Dir. for Mental
Health and Retardation
Health Services Admin.
1875 Conn. Ave., NW
Room 822
Washington, D.C. 20009
Tel: 202/629-3447

CALIFORNIA

Program Coordinator
Mental Retardation Programs
Human Relations Agency
915 Capitol Mall, Room 200
Sacramento, CA 95814

FLORIDA

Director
Division of Retardation
460 Larson Building
Tallahassee, FL 32304
Tel: 904/224-9149

GEORGIA

Assistant Director
Hospital Services Branch
Dept. of Public Health
47 Trinity Avenue, S.W.
Atlanta, GA 30334

HAWAII

Executive Officer
Waimano Training School
and Hospital
Pearl City, HI 96782
Tel: 808/4566-255

IDAHO

Division of Mental Retardation
and Child Development
Department of Health
Statehouse
Boise, ID 83707
Tel: 208/384-2256

ILLINOIS

Division of Mental
Retardation Services
401 South Spring Street
Springfield, IL 62706
Tel: 217/525-7393

INDIANA

Division on Mental
Retardation
1315 West 10th Street
Indianapolis, IN 46202
Tel: 317/634-8401

IOWA

Bureau of Mental Retardation
Lucas State Office Bldg.
Des Moines, IA 50319
Tel: 515/281-5687

KANSAS

Consultant on Mental
Retardation Services
Dept. of Social Welfare
6th Floor
State Office Building
Topeka, KS 66612
Tel: 913/296-3473

KENTUCKY

Deputy Commissioner for
Mental Retardation
Box 678
Frankfort, KY 40601
Tel: 502/564-6947

LOUISIANA

Commissioner of Mental
Retardation
P.O. Box 44215
Baton Rouge, LA 70804
Tel: 504/389-5191

MAINE

Bureau of Mental
Retardation
Room 400 - State House
Augusta, ME 04330
Tel: 207/289-3161

MARYLAND

Program Services
Mental Retardation
Dept. of Mental Hygiene
301 West Preston Street
Baltimore MD 21201

MASSACHUSETTS

Assistant Commissioner for
Mental Retardation
Dept. of Mental Health
190 Portland Street
Boston, MA 02114
Tel: 617/727-5610

MICHIGAN

Mental Retardation Specialist
Dept. of Mental Health
Bureau of Operational
Planning
Lewis Cass Building
Lansing, MI 48926
Tel: 517/373-1710

MINNESOTA

Mental Retardation Program
Office
Department of Public Welfare
Centennial Office Bldg.
Fifth Floor
St. Paul, MN 55101
Tel: 612/221-2723

MISSISSIPPI

Director of Mental
Retardation Services
Interagency Commission on
Mental Illness and Mental
Retardation
P.O. Box 1700
Jackson, MS 39205
Tel: 601/354-6692

MISSOURI

Division of Mental Health
722 Jefferson Street
P.O. Box 687
Jefferson City, MO 65101
Tel: 314/635-0251

MONTANA

Boulder River School and
Hospital
Box 87
Boulder, MT 59632
Tel: 406/225-3311

NEBRASKA

Office of Mental Retardation
State Department of Public
Institutions
State Capitol Bldg.
Lincoln, NB 68509
Tel: 402/473-1514

NEVADA

Superintendent
Box 2460
Reno, NV 89505
Tel: 702/322-6961

NEW HAMPSHIRE

Office of Mental Retardation
Department of Mental Health
New Hampshire Hospital
104 Pleasant Street
Concord, NH 03301
Tel: 603/225-5511

NEW JERSEY

Division of Mental Retardation
P.O. Box 1237
Trenton, NJ 08625
Tel: 609/292-3742

NEW MEXICO

Dept. of Hospitals and Institutions
Lamy Building
Santa Fe, NM 87501
Tel: 505/827-2595

NEW YORK

Deputy Commissioner for Mental
Retardation
44 Holland Avenue
Albany, NY 12208
Tel: 518/474-3655

NORTH CAROLINA

Deputy Commissioner for
Mental Retardation
Dept. of Mental Health
P.O. Box 26327
Raleigh, NC 27603
Tel: 919/829-7011

NORTH DAKOTA

Mental Retardation Programs
State Department of Health
320 Avenue B East
Bismarck, ND 58501
Tel: 701/224-2395

OHIO

Division of Mental
Retardation
12th Floor
State Office Building
65 South Front Street
Columbus, OH 43215
Tel: 614/469-3813

OKLAHOMA

Director of Institutions
Social and Rehabilitative
Services
P.O. Box 25325
Oklahoma City, OK 73125
Tel: 405/521-3646

OREGON

Mental Retardation Services
Mental Health Division
2570 Center Street, N.E.
Salem, OR 97310
Tel: 503/378-2429

PENNSYLVANIA

Commissioner of Mental
Retardation
Dept. of Public Welfare
Harrisburg, PA 17120
Tel: 717/787-3700

PUERTO RICO

Directoress
Mental Retardation Office
Fernandez Juncos Ave. #1264
Santurce, PR 00907
Tel: 725-7626

RHODE ISLAND

Dept. of Mental Health,
Mental Retardation and
Hospitals
1 Washington Avenue
Providence, RI 02905
Tel: 401/467-7550

SOUTH CAROLINA

Department of Mental
Retardation
2414 Bull Street
Columbia, SC 29201
Tel: 803/758-3671

SOUTH DAKOTA

South Dakota Commission of
Mental Health and Mental
Retardation
116 North Euclid
Pierre, SD 57501
Tel: 605/224-3438

TENNESSEE

Division of Mental
Retardation
300 Cordell Hull Bldg.
Nashville, TN 37219
Tel: 615/741-2526

TEXAS

Dept. of Mental Health and
Mental Retardation
Box S, Capital Station
Austin, TX 78711
Tel: 512/454-3761

UTAH

Superintendent
Utah State Training School
American Fork, UT 84003
Tel: 801/756-6022

VERMONT

Office of Mental
Retardation
Dept. of Mental Health
Montpelier, VT 05602
Tel: 802/223-2311

VIRGINIA

Mental Hygiene Programs
Dept. of Mental Hygiene
and Hospitals
P.O. Box 1797
Richmond, VA 23214
Tel: 703/770-3058

VIRGIN ISLANDS

Commissioner of Health and
Mental Retardation
Department of Health
The Virgin Islands of the
United States

WASHINGTON

Office of Handicapped
Children
P.O. Box 768
Olympia, WA 98501
Tel: 206/753-5417

WEST VIRGINIA

West Virginia Commission
on Mental Retardation
State Capitol Bldg.
Charleston, WV 25305
Tel: 304/348-2963

WISCONSIN

Bureau of Mental
Retardation
Wisconsin Dept. of Health
and Social Services
1 West Wilson Street
Madison, WI 53702
Tel: 608/266-0607

WYOMING

Wyoming State Training
School
Lander, WY 82520
Tel: 307/332-5302

Appendix B

Tentatively Identified Handicapped

Totals for Claiborne County

	Primary	Secondary	Totals
Physically Handicapped			
Speech (articulation)	96	72	168
Stutters	7	12	19
Hearing Problem	13	11	24
Strabismus	3	10	13
Blind		10	10
Thick Lens Glasses	16	22	38
Sight		7	7
Large Print Books	26	4	30
Orthopedic	3	14	17
Epilepsy			
Mongoloid	1		1
Heart Difficulty	2	2	4
Other Medical		2	2
Learning and Emotional Disabilities			
Slow Learner (I.Q. 75-90)	245		245
EMR (I.Q. 50-74)	118	2	120
SMR (I.Q., below 50)	10	2	12
Cannot Follow Simple Directions	37	48	85
Excessively Quiet	16	55	71
Very Active	14	77	91
Needs Further Testing	4	168	172
Other		4	4
Total Physical and Learning Disabilities	611		
		YES	NO
Receiving Services for Handicap		129	460
Can Student Function in Regular Classroom		243	346
Gifted		24	

Tentatively Identified Handicapped

Totals for Union County

	Primary	Secondary	Totals
Physically Handicapped			
Speech (articulation)	64	51	115
Stutters	19	16	35
Hearing Problem	34	13	47
Strabismus	6	6	12
Blind	22	4	26
Thick Lens Glasses	97	39	136
Sight			
Large Print Books	12	14	26
Orthopedic	30	20	50
Epilepsy	7	2	9
Mongoloid			
Heart Difficulty	9	2	11
Other Medical			
Learning and Emotional Disabilities			
Slow Learner (I.Q. 75-90)	121	4	125
EMR (I.Q. 50-74)	29		29
SMR (I.Q. below 50)	3		3
Cannot Follow Simple Directions	131	13	144
Excessively Quiet	34	16	50
Very Active	55	25	80
Needs Further Testing	21	177	198
Other	2	1	3
Total Physical and Learning Disabilities			
	696		
		YES	NO
Receiving Services for Handicap		3	689
Can Student Function in Regular Classroom		499	161
Gifted			
		3	

PLEASE READ FIRST

This sheet is to be used for a project under Title III to develop a program of services to handicapped children in ten counties in upper East Tennessee. This special need may be of the following types: sight, speech, hearing, orthopedic, emotional, or health type. This check sheet should be marked only after much fact finding and thought.

1. It is necessary for the homeroom teacher to look at the permanent record of each child and to observe each child carefully.
2. If the child is a referral, please tell who made the referral (brother, sister, another teacher, etc.). This is very important because you may be the only person who has knowledge of this child and his special need.
3. Please feel free to explain any of the check marks made on the sheet in the place indicated below. It will prove helpful in diagnosing the handicap.
4. It is very important that you include a specific point of reference and directions to the home of each child who might be included in the program. Centers will be set up in a central locale. It is important that we have accurate directions to the home of the child. A map would be most helpful. You may want to contact the bus driver, a friend, another teacher, or the child, if he is capable of giving good directions.
5. Please indicate the type or types of examinations the child has perhaps undergone, such as: psychological evaluation, speech, hearing, or physical, etc.
6. This paper must go back to the contact person by _____.

Name of Child

Comments and Directions Concerning Address

DATE _____

TEACHER OR INFORMANT _____

AGENCY OR SCHOOL _____

TYPE OF CLASS OR GRADE _____

REGISTERED NAMES OF CHILDREN

Age	Sex	Pre-School	Post-School	Drop Out	Stutters	Speech Difficulty (Articulation)	Receiving Speech Therapy	Deaf	Receiving Hearing Therapy	Strabismus (Cross-Eyed)	Wears Glasses (Thick Lens)	Blind	Does Child Read Large Print Books	Hard of Hearing	*IQ Above 130—Indicate Test Used	*IQ Between 75-90—Ind Test Used	*IQ Below 75—Indicate Test Used	*IQ Below 50—Indicate Test Used	Does Child Function the Best You Think He Can?	Does Child Need Further Testing?	Can Child Follow Simple Directions?	Can Child Function Educationally?	Is Child
1.																							
2.																							
3.																							
4.																							
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33.																							

Age	
Sex	
Pre-School	
Post-School	
Drop Out	
Stutters	
Speech Difficulty (Articulation)	
Receiving Speech Therapy	
Deaf	
Receiving Hearing Therapy	
Strabismus (Cross-Eyed)	
Wears Glasses (Thick Lens)	
Blind	
Does Child Read Large Print Books	
Hand of Writing	
*IQ Above 130—Indicate Test Used	
*IQ Between 75-90—Ind Test Used	
*IQ Below 75—Indicate Test Used	
*IQ Below 50—Indicate Test Used	
Does Child Function the Best You Think He Can?	
Does Child Need Further Testing?	Yes No
Can Child Follow Simple Directions?	Yes No
Can Child Function in a Regular Educational Program?	Yes No
Is Child Excessively Quiet?	Yes No
Is Child Very Active—Almost Never Still?	Yes No
Cerebral Palsy?	Yes No
Orthopedic Condition (Muscular, Bone, Spine, Joint)	Yes No
Epilepsy—Medication Used?	Yes No
Meningocele	
Heart Difficulty	
Is Child Presently on a Home Instruction Plan?	
Is Child Presently on a Hospital Instructional Program?	
Is Child in Vocational School?	

If the intelligence quotient is not available, please give the percentile, standing, quotient, or any other measurement which might be indicative of mental ability.

Appendix C

References Concerning Regional Exceptional Children Activities

Alabama University. Special Class Curriculum and Environment and Vocational Rehabilitation of Mentally Retarded Young Adults, Final Report. University, Alabama: Alabama University, November 1964, 130 p. (ED N.A.)

An evaluation of a research and demonstration project presents the purposes of the project as the following: to establish 11 demonstration projects for mentally handicapped youth in rehabilitation facilities, to demonstrate the effectiveness of agency cooperation, to develop curricula, to develop procedures for the vocational rehabilitation counselor, to identify success and/or failure factors, and to conduct followup survey.

Appell, Melville J. Description and Analysis of an Information, Referral, and Coordination Unit. Miami Beach, Florida: Annual Meeting of The American Association On Mental Deficiency, February 1966, 5 p. (ED N.A.)

Describes the establishment, operation, and failure of the Information, Referral, and Coordination Unit (IRC) to serve retardates and their families.

Fudell, Stanley E. A Regional Approach to Training and Research in the Education of Handicapped Children. Atlanta, Georgia: Southern Regional Education Board, December 1967, 67 p. (ED026 794.)

Description of a Handicapped Children Project established to ascertain the southern region's needs and resources in special education teacher training programs. It was intended to encourage inservice training, to assist in planning for cooperative use of training and research resources, to provide information to states, and to assist in planning student recruitment.

Gunderson, A. Norman. "Quality Education Near Home," Volta Review, Vol. 68, November 1966, p. 665-9. (ED N.A.)

The environmental advantages of day class programs for the deaf are presented. Regional cooperation is recommended for establishing programs in counties of insufficient population.

Jordan, June B. (ed.). Special Education Services in Sparsely Populated Areas: Guidelines for Research. Boulder, Colorado: University East Campus, 1966, 32 p. (ED N.A.)

Offers guidelines for conducting a comprehensive, cooperative study cutting across geographic areas and political and educational groups.

Management Services Associates, Inc. Special Education in Texas. Austin, Texas: the Associates, September 1968, 116 p. (ED031 015.)

Proposes a program for trainable mentally retarded students in an independent school district.

Maryland University. Guidelines for Administration of an Educational Program for Physically Handicapped Children in the Dayton-Miami Valley Region, Final Report. College Park, Maryland: the University, December 1969, 140 p. (ED037 871.)

The report discusses an Ohio regional program for the education of the deaf, blind, and physically handicapped dealing basically with solutions to organizational problems.

Mullen, Francis A. Educating Handicapped Children. Washington, D.C.: Educational Service Bureau, Inc., 1969, 90 p. (ED N.W.)

The manual presents varying philosophies of education for the handicapped and considers the nature and incidence of handicaps. Special programs and services for handicapped children are described, and information is provided concerning organizing and staffing in the operating district and organizing for special education across district lines.

Obermann, C. Esco, and Kurren, Oscar. Coordinating Services for Handicapped Children, a Report of the National Institute on Services for Handicapped Children and Youth. Washington, D.C.: Council for Exceptional Children, 1964, 71 p. (ED018 024.)

Describes guidelines developed by preliminary committees and refined by conferences to treat cooperation among voluntary organizations, state interdepartmental cooperation, coordinating services at the intermediate level, comprehensive diagnostic and treatment centers, and coordination of special education and vocational rehabilitation.

Pine Bluff School District No. 3. Region VII Special Education Services Center; An Operational Proposal by the Pine Bluff School District No. 3. Little Rock, Arkansas: the school district, 1969, 251 p. (ED038 804.)

Proposes a special education service center to be located at a children's clinic and to provide mobile on site services to school districts in an eight-county area. Regional services were to include the following: diagnosis and evaluation of children with poor academic skills; perceptual development treatment and physical, occupational, and speech therapy; educational and training programs for physically and mentally handicapped children; inservice professional education; and a loan library of special education instructional materials. Further services proposed were evaluation services, a special education training laboratory, and coordination of local and state special education programs.

Wisconsin State Department of Public Instruction. Guidelines for Wisconsin's Directors, Coordinators and Supervisors of Special Education. Madison, Wisconsin: the State, 1969, 24 p. (ED036 930.)

Reviews the growth of senior level directors, coordinators, and supervisors in special education in Wisconsin. The role of regional administrators is further specified.

Young, Earl B. (ed.). Vocational Education for Handicapped Persons; Handbook for Program Implementation. Pittsburgh, Pennsylvania: Pittsburgh University, August 1969, 131 p. (ED032 695.)

Considers the following: different types of handicaps; cooperation and interagency involvement; services available from vocational rehabilitation; a model for a state-wide cooperative agreement; programs and services; and provision of services in rural areas.

Appendix D

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Special Education IMC/RMC Network

National Headquarters
Don Erickson, Coordinator
Jefferson Davis Plaza
1499 Jefferson Davis--Suite 928
Arlington, VA 22202

Instructional Materials Reference Center
American Printing House for the Blind
1839 Frankfort Avenue
Louisville, KY 40206

New England Materials--
Instruction Center
Boston University
704 Commonwealth Avenue
Boston, MA 02215

Instructional Materials Center
For Special Education
University of So. Calif.
212 W. 8th Street
Los Angeles, CA 90057

Rocky Mountain Special Education
Instructional Materials Center
Colorado State College
Greeley, CO 80631

CEC Information Center on
Exceptional Children
(CEC ERIC)
The Council for Exceptional
Children, NEA
1201 Sixteenth Street, N.W.
Washington, D.C. 20036

Southeastern Materials Center
University of South Florida
Tampa, FL 33620

Instructional Materials Center for
Handicapped Children and Youth
Office of Superintendent of Public
Instruction
726 So. College Street
Springfield, IL 62706

Instructional Materials Center
Ill. Center for the Visually Handicapped
Springfield, Illinois

Special Education Instructional
Materials Center
University of Kansas
1115 Louisiana
Lawrence, KS 66044

University of Ky. Regional Special
Education Instructional Mat. Center
641 South Limestone Street
Lexington, KY 40506

USOE/MSU
Instructional Materials Center for
Handicapped Children and Youth
213 Erickson Hall
Michigan State University
East Lansing, MI 48823

Special Education Instructional
Materials Center
New York State Education Department
800 North Pearl Street
Albany, NY 12204

Regional Special Education Instructional
Materials Center
Hunter College, Box 536 x
695 Park Avenue
New York, NY 10021

Northwest Regional Special Education
Instructional Materials Center
University of Oregon
1612 Columbia Street
Eugene, OR 97403

Special Education Instructional
Materials Center
University of Texas
304 West Fifteenth Street
Austin, TX 78701

Mid-Atlantic Regional Special Education
Instructional Materials Center
George Washington University
Washington, D.C. 20006

Special Educational Instructional
Materials Center
University of Wisconsin
415 West Gilman Street
Madison, WI 53706

Northeast Regional Media Center for
the Deaf
University of Massachusetts
Amherst, MA 01003

Midwest Regional Media Center
for the Deaf
University of Nebraska
Lincoln, NB 68508

Southern Regional Media Center
for the Deaf
College of Education
University of Tennessee
Knoxville, TN 39716

Southwestern Regional Media Center for
the Deaf
New Mexico State University
P.O. Box 3AW
Las Cruces, NM 88001

Appendix E

Exceptional Children Bibliographies Available from:
The Council for Exceptional Children
Jefferson Plaza, Suite 900
1499 Jefferson Davis Highway
Arlington, VA 22202

The following bibliographies have been compiled on a selective basis from issues of Exceptional Child Education Abstracts as of February, 1971. Criteria used in their selection is as follows: recency, availability, information value, author's reputation, and classical content. Each abstract included provides pertinent bibliographic information about the document as well as a summary of its contents.

- 601. Hyperactivity - 27 Abstracts - No Index
- 602. Drug Therapy - 31 Abstracts - No Index
- 603. Autism - 47 Abstracts - No Index
- 604. Mongolism - 53 Abstracts - No Index
- 605. Arts and Crafts - 99 Abstracts - Index
- 606. Preschool and Early Childhood - 67 Abstracts - Index ED 036 024
- 607. Homebound or Hospitalized - 43 Abstracts - Index
- 608. Behavior Modification - 81 Abstracts - Index ED 036 030
- 609. Gifted and Creativity Programs - 81 Abstracts - Index ED 036 037
- 610. Administration - 37 Abstracts - Index
- 611. Curriculum Guides - 100 Abstracts - Index
- 612. Physical Education & Recreation - 73 Abstracts - Index
- 613. Reading Methods and Problems - 57 Abstracts - Index ED 036 021
- 614. Multiply Handicapped - 52 Abstracts - Index
- 615. Learning Disabilities - Programs - 96 Abstracts - Index
- 616. Learning Disabilities - Research - 57 Abstracts - Index ED 036 026
- 617. Emotionally Disturbed - Programs - 80 Abstracts - Index ED 036 027
- 618. Emotionally Disturbed - Research - 66 Abstracts - Index ED 036 028
- 619. Visually Handicapped - Programs - 53 Abstracts - Index
- 620. Visually Handicapped - Research - 81 Abstracts - Index
- 621. Educable Mentally Handicapped - Programs - 100 Abstracts - Index
ED 036 029
- 622. Educable Mentally Handicapped - Research - 68 Abstracts - Index
ED 036 023
- 623. Regular Class Placement/Special Classes - 56 Abstracts - Index
- 624. Aurally Handicapped - Programs - 89 Abstracts - Index
- 625. Aurally Handicapped - Research - 89 Abstracts - Index
- 626. Speech Handicapped - Programs - 49 Abstracts - Index
- 627. Speech Handicapped - Research - 100 Abstracts - Index
- 628. Physically Handicapped & Special Health Problems - 77 Abstracts -
Index
- 629. Counseling and Psychotherapy - 88 Abstracts - Index ED 036 035
- 630. Perceptual Motor Learning - 96 Abstracts - Index
- 631. Parent Education (Helping bibliog.) - 92 Abstracts - Index

- 632. Diagnostic Teaching - 66 Abstracts - Index
- 633. Vocational Training - 88 Abstracts - Index ED 036 025
- 634. Physical Facilities - 91 Abstracts - Index
- 635. Professional Education - 100 Abstracts - Index
- 637. Instructional Materials - 44 Abstracts - Index
- 638. Directories of Services and Facilities - 50 Abstracts - Index
ED 036 022
- 639. Gifted and Creativity Research - 73 Abstracts - Index
- 640. Trainable Mentally Handicapped - Programs - 58 Abstracts - Index
- 641. Trainable Mentally Handicapped - Research - 78 Abstracts - Index
- 642. Delinquency - 43 Abstracts - Index
- 643. Cerebral Palsy - 81 Abstracts - Index
- 644. Parent Counseling - 76 Abstracts - Index
- 645. Slow Learners - 83 Abstracts - Index
- 646. Minority Groups - 76 Abstracts - Index
- 647. Teacher Aides and Nonprofessional personnel - 89 Abstracts - Index
- 650. Disadvantaged - 97 Abstracts - Index
- 651. Mental Health - 66 Abstracts - Index
- 652. Dyslexia - 84 Abstracts - Index
- 653. Audiovisual Instruction - 98 Abstracts - Index
- 654. Programmed Instruction - 72 Abstracts - Index
- 657. A Selected Guide to Government Agencies, et. al.
- 658. A Selected Guide to Public Agencies, et. al.
- 659. Special Education IMC/RMC Film Collection

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